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Can you live with a tfcc tear

Does tfcc tear ever heal. How bad is a tfcc tear. What happens if a tfcc tear goes untreated. Can a tfcc tear get worse.

1. There are two main causes of a TFCC tear, which includes an injury that leads to falling on the hand (type 1) and degeneration where the cartilage wears down (type 2). 2. Athletes, people over 50, and those with previous wrist injuries are prone to getting TFCC tears. 3. Symptoms of a TFCC injury include pain, swelling, tenderness, weakness, clicking sounds, and decreased range of motion. 4. Treatment options for TFCC tears include non-surgical and surgical procedures based on the injury classification. 5. Conservative treatments involve rest, pain medications, steroid injections, physical therapy, and bracing, while surgery is recommended if conservative treatment fails or if there's joint instability. 6. Recovery time depends on the type of treatment applied, with 4-6 weeks for non-surgical treatment and up to 12 weeks or more after surgery. 7. Preventing a TFCC tear involves strengthening wrist and forearm muscles through exercises and avoiding repetitive high-impact activities. 8. Life after a TFCC tear has a promising outlook, especially when treated conservatively, with surgery considered only if previous treatments fail or if there's joint instability. TFCC tears often manifest as ulnar-sided wrist pain, which typically intensifies with activity and can be accompanied by instability and weakness. These tears may also present with peripheral or central tears that fail to respond to nonoperative management. There are two primary methods for repairing TFCC tears: arthroscopic and open procedures. The chosen approach is contingent upon the severity and type of tear. Arthroscopic repair involves using a small camera and instruments through a minimal incision, allowing the surgeon to visualize and clean the tear before capturing and repairing the torn portions of the TFCC within the wrist. This method minimizes soft tissue disruption, resulting in less post-operative stiffness and pain, and facilitating a more rapid functional recovery. Open procedures are typically elected for TFCC tears that cannot be safely repaired arthroscopically, often due to chronicity or associated instability requiring reconstructive procedures with tendon grafts. Such open procedures are generally more demanding and not feasible through small incisions. Preoperative preparation includes instruction on necessary anesthesia arrangements, whether regional with sedation or general anesthesia. Patients should be informed about the anticipated post-operative process and recovery times. Post-operatively, patients may experience some pain at the surgical site and in the wrist, which can be managed with over-the-counter pain relievers or stronger prescription medications. TFCC surgery always involves placement of a cast for post-operative protection and healing, with peripheral tear repairs requiring an elbow-inclusive cast for at least 6 weeks and central tears generally requiring less time. A cast is typically immobilized for at least two weeks following wrist surgery, with a follow-up assessment scheduled for two weeks post-operatively. The type and severity of the tear, as well as the surgical procedure performed, will determine the decision regarding post-operative immobilization. During the six-week post-operative period, patients are advised to avoid activities such as resistance training, heavy lifting, and twisting. For open TFCC repair surgery, patients can expect some level of post-operative pain along the surgical incision and wrist. The surgeon will work with the patient to develop a personalized pain management plan. A cast is usually immobilized for six weeks, with the elbow allowed to bend but not rotate. The cast cannot be removed for the first two weeks post-operatively, but can be taken off for hygiene purposes after four weeks. At the six-week mark post-op, hand and wrist therapy typically begins to help achieve range of motion. By the three-month mark, patients usually begin resistance and strengthening exercises and activity restrictions are lifted, depending on their individual injury and surgery. Most patients who undergo successful TFCC repair can resume all normal physical activities that require upper extremity use. A TFCC tear occurs when the cartilage connecting the carpal bones in the wrist and forearm is damaged. There are two types of TFCC tears: traumatic and degenerative. Traumatic tears occur due to injury, while degenerative tears are associated with age and weakened cartilage. Your Wrist May Swell and Feel Weak After a TFCC Tear Swelling of the wrist may occur after a traumatic injury or age-related wear and tear on the joint. Some common symptoms include a reduced grip strength, limited movement in the hand and wrist, clicking sounds when moving the wrist, and tenderness. The triangular fibrocartilage complex (TFCC) is prone to tears due to repetitive motions, direct injury, falling onto an outstretched hand, or pre-existing conditions such as ulna variance. As we age, our bones and cartilage weaken, making us more susceptible to TFCC injuries. Diagnosis typically involves a physical examination, medical and family history discussion, and specialized tests like MRI and X-Ray. The doctor will assess the extent of the injury by examining the images produced during these tests. Treatment options include medications, therapy, and surgery. Mild tears may be treated with nonsurgical methods, while severe tears often require surgical intervention. Treatment involves reducing inflammation and swelling using anti-inflammatory medication or corticosteroid injections, learning safe wrist and hand use techniques through physical therapy, and temporarily wearing a splint or cast to immobilize the wrist. In more severe cases, minimally invasive surgery like arthroscopy may be necessary, where the doctor inserts a small camera into tiny incisions in the wrist to examine the TFCC. In case of a severe tear, the medical professional will thoroughly clean the affected area and make the necessary repairs. For more serious injuries, open surgery is sometimes required to fix the triangular fibrocartilage complex. This type of operation involves making larger cuts in the skin and repairing damaged ligaments and tendons around the wrist using tools like metal screws and pins. Post-surgery, your doctor might recommend medication, physical therapy, and a break from daily routines including driving, work, exercise, sports, and other leisure activities.